Integrated Safety Management (ISM) Plan Self Assessment for Computer & Computational Sciences Division (CCS)

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CCS Division Director _____
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LANL Performance Expectations	Organizational Expectations	Performance-Based Validation*
1. Define Scope of Work Managers are visibly committed to the implementation and sustained execution of all elements of the Integrated Safety Management (ISM) System. The division has an approved and implemented ISM Plan. Work planning includes identification of goals and objectives, well-defined resource requirements, and task prioritization. Workers and supervisors have defined the work in sufficient detail to allow hazards and hazardous situations to be identified and evaluated. Controls for critical process and work are integrated into the operation (e.g., calibration of instrumentation, records management, documented procedures, and post-maintenance testing). Clear and unambiguous lines of authority and responsibility for ensuring safety and environmental protection are established, maintained, and understood by the workforce.	Division director, group leaders, and team leaders communicate ES&H expectations to all staff. The new employee checklist available on CCS-DO webpage is used to document requirements and responsibilities. The division holds CCS employees and resident contractors accountable for ES&H. Guests and visitors working with CCS operations for more than two weeks must receive GET and site-specific training. This includes HCP training and sign-off Hazard Controls Plans (HCP) are developed for routine work by the responsible supervisor. Each employee will read and follow their appropriate HCP. Supervisors will authorize the work and the worker through the HCP. Examples of communications used in CCS includes ES&H discussions at division, group, and team meetings, performance appraisals, and in written communications (e.g., division memos and emails).	1.1 During MWA refer to MWA applicable guidance cards. Ask a different ES&H related question each quarter. Document description of questions asked and breakdown of answers (i.e. percent correct) in MWA database for Division trending. Quarterly MWA questions: **Oct.-Dec.:** "How are you held accountable for safety?" **Jan.-Mar.:** "Who are your Facility Manager and Group and Division ES&H Representatives? **Apr.-Jun.:** "Has your workstation been evaluated and recommendations completed? Have you had any ergonomic training? Has either helped your comfort and productivity? **Jul.-Sep.:** "What would you do if a serious safety incident occurred?" (Stop work, notify supervisor and ES&H personnel, call EMO or 911, etc.). 1.2 Document the following while conducting MWA: ?? **Greater than 30% of walkarounds are used to provide information to support organizational self-assessment plans.** ?? **Greater than 50% of the walkarounds focus on workers and observation of work activities.**

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2. Analyze the Hazards Workers and supervisors use ES&H subject-matter experts and other knowledgeable resources to assist in assessing hazards and risks to the environment, other vulnerabilities (e.g., mission and security), and any situations or circumstances that could cause harm to employees, the public, the environment, and Laboratory property. The hazard analysis considers (1) the impact of other facilities and organizations; (2) the transfer of end and by-products and/or wastes outside the facility; and (3) identification of DOT- or EPA-regulated materials. Hazards and risks to the environment are identified and prioritized. Hazards to the environment are evaluated both individually and cumulatively with respect to environmental risk (e.g., site-wide permit limits) Facilities have an approved authorization basis. USQ or USQ-like safety evaluations are performed when temporary or permanent changes that are not described in existing safety analyses are proposed for facilities, procedures, tests or experiments.	Workers and managers use safe work practices to identifying and evaluate risk to themselves, their coworkers, the facility, or the environment. Workers know their group and division ES&H support and facility personnel and institutional contacts. CCS's primary hazards include: ?? ergonomics of VDTs ?? lifting and material handling ?? electrical (CCS-1, CCS-2, CCS-3, and CCS-4) Programmatic funding requests are reviewed and approved by the CCS ES&H Coordinator prior to submittal for funding. Facility work that impacts the environment is reviewed through the ESH-ID process. Authorization basis and USQ are not applicable to CCS	2.1 Verify that HCP have been completed for all routine division work. Report percent of HCP signed. 2.2 If workers are assigned to field positions, observe activities and hazards in the field and interview workers to determine if they adhere to the host organization's ES&H requirements. Contracts for CCS employees working for other organizations should include requirements for properly adjusted computer workstations, if applicable. 2.3 Determine that Hazard Control Plans (HCP) and Activity Hazard Analyses (AHA) have task descriptions that are correct, hazard analyses that are current and controls that adequate. Tasks can be evaluated through HCP or work control. 2.4 * Report the number of NEPA (operational funding) and ESH-ID (facility work) reviews completed.

3. Develop and Implement Controls Facility-level controls and expectations are defined and documented in the facility safety plans (FSPs). Hazards to the environment are controlled both for immediate effects and for cumulative life-cycle effects. HCPs or the activity or collection of activities are approved and used in the performance of programmatic work. HCPs and facility management work control documents address the applicable institutional, facility, and activity controls for the work. Controls are compatible with FSP controls. Administrative and engineering controls that prevent and mitigate hazards and risks to the environment are tailored to the work being performed and the associated hazards. Facility operating limits and requirements are communicated to facility tenants and a FTA is in place. Tenant's line management (1) informs and seeks the approval of the facility manager for activities that are not already clearly permitted in the FSP or FTA; and (2) works with the facility manager to ensure that the integrity of the facility operating limits is maintained. Potential hazards to subcontractors at the facility are identified and communicated. The subcontractor agrees to perform the work safely and meet the applicable codes and standards associated with the work.	Both operation and facility hazard control systems are reviewed, approved, and documented in HCP or work control and communicated clearly to the workers. See Section 2. Appropriate levels of line management authorize work and the workers. Employees are properly and adequately trained per LANL and division requirements. Equipment or material that present a potential for environmental damage is controlled though secondary containment, storage containers, or other means. Used batteries are recycled through JCNNM (lead acid) or stored for pick-up in Universal Waste Storage Areas. The FMU63 Facility Safety Plan (FSP) and the FTA are revised annually, if needed, and made available for customer reference. Groups operate in accordance with Facility-Tenant Agreement requirements.	3.1 * Track and document completion of ES&H recommendations, especially ergonomic evaluations. 3.2 * Review deficiency closure data (MWA, SCS and audits) for satisfactory corrections. Report percent of outstanding deficiencies. 3.3 During MWA review at least one operation and assure that the hazards associated with those work activities and the appropriate controls are covered in the HCP. Report number and type of exceptions in MWA database.

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4. Perform Work Safely Roles, responsibilities, and authorities for conducting work are communicated to everyone in the safety-responsible line management chain. Persons performing work understand their roles and responsibilities and understand that they are held accountable for ES&H and security. Protection of employees, the public, the environment, and Laboratory property is a line management responsibility. The conditions and requirements for the initiation and conduct of work are clearly established. The extent of documentation and the levels of authority for agreement are tailored to the complexity of, and hazards associated with, the work. Work is stopped whenever a worker perceives a situation that may jeopardize workers, security, the public, or the environment.	The office director, group leaders, team leaders, and workers ensure that their work is performed in a manner that protects workers, the public, and the environment. Workers exhibit safe work behaviors, as evidenced by a TRI rate that is at 3.4 or less and a LWC rate that is at 1.8 or less. No environmental deficiencies (RCRA, NPDES) are reported in CCS, LANL, or external audits or inspections. No hazardous chemical wastes are routinely generated in CCS Division. These waste occur as a result of facility clean-up or remodeling (asbestos, chiller fluids, etc.). Since CCS is a Division since October 1, 2000, the FY2000 baseline is not established. Recycling and waste minimization efforts are maintained.	4.1 Workers report near misses to line management and CCS Division ES&H Coordinator for lessons-learned and shared. * Report lesson-learned distributions. 4.2 * Report and trend injury and illness data. 4.3 * Report and trend environmental findings and waste levels. 4.4 During MWA question workers on the LANL requirements that directly affect their work, especially stop work requirements. Report the percent workers with adequate knowledge of their HCP.

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Effectiveness of the training program is evidenced by the criteria listed below: ?? line managers ensure that workers receive training commensurate with job assignments; ?? on-the-job training is delivered in a systematically developed and consistent manner and documented; and ?? training records are up-to-date, complete and accurate.	Workers are trained, qualified, and knowledgeable to perform their duties.	4.5 * Verify that training requirements in HCP are current. Implementation of all training compliance will be reported through EDS.
A system is in place to ensure that new requirements and changes to requirements at both the facility and activity level are tracked and implemented. The organization has a system in place that provides for appropriate documentation and record-keeping of facility/program/project performance.	The CCS Point-of-Contact distributes draft requirements for comments and final policy for implementation. ES&H and facility records are kept by the CCS ES&H Coordinator and the Facility Team Leader respectively.	4.6 In coordination with CCN Division, CCS Division is developing an on-line policy implementation system similar to BUS's system. Training compliance will be reported through EDS. Managers will receive copies of percent compliance through the division training generalist.

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5. Provide Feedback and Continuous Improvement Line management observes the activities of the workforce to ensure they meet activity, facility, and institutional expectations. Line management self-assessment includes assessing work performance and results against established criteria, identifying process improvements, taking effective corrective action, and sharing lessons learned. Processes are provided for workers to identify and help resolve ES&H problems, as well as to contribute to the continuous improvement of ISM processes and activities. Division personnel review ES&H data and reports (e.g., lessons learned, occurrence reports, Appendix F performance measures) and initiate appropriate mitigation measures or opportunities for improvement.	Managers use walkarounds to assess ES&H issues, correcting situations as required (a minimum of one walkaround for each manager per month). Managers respond to employee safety concerns. Safety performance data (e.g., management walkarounds, lessons learned, incident reports, ES&H monitoring reports, Appendix F measures) are reviewed by managers and used to develop opportunities for improvement and institute appropriate mitigation measures (i.e., corrective actions).	5.1 Report attendance at group ES&H meetings (number of meetings per quarter and percent attendance) and * monthly Division Representatives ES&H meetings. 5.2 * Review performance data (MWA, SCS, I-track) for open corrective actions and review corrective actions for management follow-up and for closure**.**

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Managers solicit information from workers to ensure that work is performed safely, securely, and cost effectively. Managers use worker input and other information sources as the basis for self-evaluation. Self-assessment results are documented and reported to the cognizant line managers, facility managers, and/or safety function managers (as applicable). Corrective actions of findings identified from self-assessments are tracked. Correction includes the identification of causes of problems and recurrence prevention measures. A lessons learned program is in place that includes a review of appropriate on-and off-site accidents/incidents.		.

Annual Review Plan:

Frequency and specific dates of self-assessment

Self-Assessments to be conducted quarterly by the Division Director or Deputy, at least one group leader and one group ES&H Representative. These personnel should change periodically.

Locations to be assessed

All facility buildings are assessed annually by the Facility Manager and Division ES&H Coordinator or their designees

All CCS operations are assessed annually by Line Manager and Group and Division ES&H personnel.

Portions of the self-assessment template to be assessed

1st quarter assessment: Define the Work and Develop and Implement Controls sections of the plan

2nd quarter assessment: Analyze the Hazards section of the plan

3rd quarter assessment: Perform the Work section of the plan*

4th quarter assessment: Provide Feedback and Continuous Improvement section of the plan

Note: All items in bold on the self-assessment template must be captured and reported quarterly.
*** Indicates items that are tracked and trended by CCS ES&H Coordinator.**

Report:

Executive Summary *(discusses how well the organization is implementing ISM including successes and opportunities for improvement)*

Scope of the Assessment *(includes sections of the self-assessment template that were assessed, locations visited, jobs observed, personnel interviewed, and documents reviewed)*

Conclusions *(includes analysis and trending of self-assessment results and Appendix F reporting data)*

Issues *(Note: identified performance gaps are expected to result in the development of issues. Issues developed require the following information: description of the problem; category of significance; causal factors, if known; issue owner [if an owner cannot be identified, state that you need assistance in identifying an issue owner]; and name of Action Plan preparer, if known.)*

Noteworthy Practices *(conditions that are well above normal performance expectations or standard practices and are worthy of commendation and communication to others as a good example)*